

**MEDICAID CODING GUIDELINE**  
Effective for date of service 9/1/04 and after  
Revised 1/1/05; 1/1/07

## Immunization Administration for Vaccines/Toxoids

**CPT CODE(S):**        **90465-90474** (See current CPT® for code descriptors)

**Indications for use:**        Report/bill **90465-90474** **in addition** to the Vaccines,  
Toxoids (90476-90749).

**CRITERIA:**                    90465-90468 must be reported/billed only when the provider renders and documents  
face-to-face counseling to the patient's (younger than 8 years of age)  
parent/guardian during the administration of any vaccine.

**OR**

90471-90474 must be reported/billed when the administration of any vaccine is not  
accompanied by face-to-face provider counseling to the patient and/or  
parent/guardian.

**NOTE:** To report/bill the immunization administration of a vaccine/toxoid, the  
vaccine/toxoid product code(s) (90476-90749) **MUST** be reported/billed in addition to  
the immunization administration code(s) 90465 – 90474.

**IMPORTANT:** Effective September 1, 2004 - When ND Medicaid is the secondary payer, the provider  
must submit the claim according to ND Medicaid guidelines; therefore it is acceptable for providers to  
change/add the appropriate CPT code(s) on the claim (i.e. 90465-90474).

**COVERED DIAGNOSIS:**        **V03.\_\_ - V06.9 -**        Need for prophylactic vaccination and inoculation  
against, *\_(specify disease[es])\_* . See current edition of ICD-  
9-CM for accurate code(s).

**CODING/BILLING:**        **90476 – 90749**        Identifies the **Vaccine/Toxoid** product only.  
(See current CPT® for code descriptors)  
**NOTE: ND Medicaid may not allow/reimburse all  
vaccines/toxoids in this code range.** If the vaccine/toxoid is not  
allowed/reimbursed the immunization administration will not be  
allowed/reimbursed.

**OR**

**90476 – 90749 - SL** (state supplied) - **\$0.00**  
When the vaccine/toxoid product is supplied by NDDoH, you  
must append the vaccine/toxoid product code(s) with  
modifier **SL**.

**AND**

**90465 - 90474**        The appropriate **Immunization Administration**  
**code(s) and charge(s) must be billed with Vaccine/Toxoid**  
**product code(s).**